

AUG 03 2004

Attorney Docket No. 010555

OFFICIAL

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of

James A. Hutchison, IV

Serial No. 10/034,776

Filed: December 21, 2001

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For: ARBITRATED AUDIO
COMMUNICATION WITH
REDUCED LATENCY

) Group No. 2684

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated May 10, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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Depositor's Name: _____
(type or print name)

Date: 8/3/04

FACSIMILE

☒ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Daria Kasimova

(type or print name)

Signature: _____



AUG 03 2004

5775 Morehouse Drive,
San Diego, California 92121-2779
(858) 587-1121 Fax: (858) 658-2502

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Facsimile Transmittal

DATE: August 3, 2004
TO: USPTO
ATTN: EXAMINER Angelica Perez
RE: Serial No. 10/034,776
FAX : (703) 872-9306
FROM: George C. Pappas

Number of Pages Sent: 13 (including this transmittal cover sheet)

ATTACHED HERETO IS AN AMENDMENT TRANSMITTAL FORM IN (1) PAGE; AND AN AMENDMENT IN (11) PAGES. PLEASE CALL ME IF YOU HAVE ANY QUESTIONS.

I hereby certify that this correspondence is being sent VIA FACSIMILE to the Commissioner of Patents at fax number (703) 872-9306. Attention Office of Amendments, on:

8/3/04

(Date of Deposit)

Darla D. Kasmedo

(Name of the Person Making the Deposit)

(Signature)

AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer No.: 23696
Attorney Docket No.: 010555
In Re Application of: James A. Hutchison
Serial Number: 10/034,776
Filed: December 21, 2001
Examiner: Angelica Perez
Group Art Unit: 2684

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	36	35	1	x \$18 =	\$18
Independent**	7	6	1	x \$86 =	\$86
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				\$290	\$0
EXTENSION FEES <input type="checkbox"/> One Month <input type="checkbox"/> Two Months <input type="checkbox"/> Three Months				\$110	\$
				\$420	\$
				\$950	\$
TERMINAL DISCLAIMER				\$110	\$
				TOTAL FEE	\$104

*If the number in column a is less than 20, enter 0 in column c.
**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$104.
The Commissioner is hereby authorized to charge payment of any additional fees which may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 8/3/04

Signature: _____

George C. Pappas, Reg. No. 35,065
858-651-1306

QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

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(type or print name)

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Depositor's Name: Daria Kasmir
(type or print name)

Signature: _____

(TRANSM.D.VER1.13-04/30/04)